PART B - FEE(S) TRANSMITTAL									
0 0 8	Complete and send this form, together with applicable fee(s), to: Ma					Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450			
	INSTRUCTION : This fo	RUCTION FEE (if required). Blocks 1 through 4 should be completed where printed further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as the printed before the correspondence address as the printed before the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for							
A.	CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1) 27820 7590 04/07/2004 WITHROW & TERRANOVA, P.L.L.C. P.O. BOX 1287 CARY; N.C. 27512					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below. Depositor's name) (Signature)			
	APPLICATION NO. FILING DATE FIRST NAME				INVEN	FOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
	10/057,707 01/24/2002 Pengfei Zhang A-68184-1/ENB 9005 TITLE OF INVENTION: VCO WITH HIGH-Q SWITCHING CAPACITOR BANK								
	APPLN. TYPE	SMALL ENTITY	ISSUE FE	E	PUBLICATION FEE		TOTAL FEE(S) DUE	DATE DUE	
	nonprovisional	nonprovisional YES \$665 EXAMINER ART UNI SHINGLETON, MICHAEL B 2817		UNIT CLASS-SUBCLASS		\$665	07/07/2004		
	EXAN					ASS-SUBCLASS			
	SHINGLETON					331-014000			
4	1. Change of correspondence address or indication of "Fee Address" (37 CFR I.363). 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agents OR, alternatively, (2) the name of a gent of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment habeen previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE								
	RF MICRO DEVICES, INC. GREENSBORD, NC								
	Please check the appropriate assignee category or categories (will not be printed on the patent); 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s):								
	Issue Fee A check in the amount of the fee(s) is enclosed.								
	□ Publication Fee □ Advance Order - # of Copies (enclose an extra copy of this form). □ Payment by credit card. Form PTO-2038 is attached. □ The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number (enclose an extra copy of this form).								
Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above								entified above.	
(Authorized Signature) (Date) 06/29/2004 SZEWDIEZ 00000040 10057707									
	NOTE; The Issue ree and Publication Fee (if required) will not be accepted from a other than the applicant; a registered attorney or agent; or the assignee or other painterest as shown by the records of the United States Patent and Trademark Office.					01 FC:1501 1330.00 OP			
	case. Any comments on suggestions for reducing Patent and Trademark 22313-1450. DO NOT S	ation is required by 37 CFR by the public which is to fy is governed by 35 U.S.C. tes to complete, including gm to the USPTO. Time withe amount of time you this burden, should be sent Office, U.S. Department JEND FEES OR COMPLE for Patents, Alexandria, Vir	require to complete to the Chief Inform of Commerce, Al	nation is requi PTO to proce 4. This collect and submitting upon the indice this form a nation Office lexandria, Vi THIS ADDI	red to ess) an tion is ng the vidual and/or U.S. irginia RESS.				

TRANSMIT THIS FORM WITH FEE(S)

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.